

INDIVIDUAL PROVIDER DESCRIPTIONS

Volunteers of America of Kentucky, Inc.

1. *Name and Type of Organization* – Volunteers of America of Kentucky, Inc./Shelby Men's Center, a private non-profit agency
2. *Service Area* - Louisville/Jefferson County metropolitan area
3. *PATH Funding* - \$90,000
4. *Flow of PATH Funds* – Funds are contracted to Seven Counties Services, the Regional MH/MR Board, then subcontracted to VOA.
5. *Direct/Indirect Services* – VOA, as a subcontractor of Seven Counties Services, Inc., provides direct services at its Shelby Men's Center.
6. *Non-PATH Funded Homeless Services* - Clients served at Shelby Men's Center obtain mental health services and other services and supports from a variety of community-based providers funded through resources other than PATH, such as:
 - (1) Seven Counties Services, Inc., which provides case management; clinical evaluation and assessment; medication management; ongoing monitoring and treatment of psychiatric conditions; community support services; and individual and group counseling as needed.
 - (2) Bridgehaven, which provides therapeutic rehabilitation and outpatient counseling.
 - (3) University of Louisville Psychiatric Services, which provides general adult psychiatric services on an outpatient basis.
 - (4) University of Louisville, Emergency Psychiatric Services, which provides emergency evaluation and treatment of psychiatric conditions.
 - (5) St. John Center, Inc. which assists clients in obtaining prescription medication for psychiatric conditions and introduction to local mental health services.
 - (6) Central State Hospital, which provides a full range of psychiatric services for adults through a multidisciplinary team.
 - (7) DMHMRS Case Management wrap-around funds.
 - (8) Seven Counties Services' Crisis and Information Line, which provides crisis intervention and referrals.
7. *Coordination of Services* –

The coordination of PATH-supported services with services that are not supported by PATH funds is reciprocal in nature. Each client has a case manager employed by Seven Counties Services. This person assists the client in accessing appropriate community, social, and vocational services, including entitlements. The client may be referred by his case manager or his ACCESS (intake) appointment may occur after he is in the program.

Thus, Shelby Men's Center receives referrals from several sources: one of the State hospitals (usually Central State), local and state correctional facilities, University Hospital, Seven Counties Services, Charter Hospital, Ten Broeck Hospital, etc. Likewise, Shelby Men's Center may refer a client to Seven Counties Services, University Hospital, or one of the other hospitals. Referrals for clients are also made to community-based service providers such as Kentucky Vocational Rehabilitation, AA/NA and other self-help support groups, community health centers, and the Jefferson County Department for Human Services.

8. *Services to be Provided with PATH Funds –*

- Habilitation and rehabilitation services
- Staff training
- Supportive and supervisory services in residential settings
- Referrals for primary health services, job training, education services and relevant housing services

9. *Housing Services Provided through PATH Funding –* No housing services, as specified in the PATH legislation, are provided with PATH funding.

10. *Current and Anticipated Gaps in Service -*

- (1) Permanent housing with on-site support services for persons with a mental illness;
- (2) Lack of other decent, affordable housing
- (3) Financial resources or insurance to cover the costs of medications for mental illness; and
- (4) Community-based recreational opportunities for persons with mental illness.

11. *Strategies to Overcome Gaps -* Strategies include:

- Building new or rehabilitating existing buildings that could be transformed into multifamily housing
- Supporting the Louisville/Jefferson County Homeless Coalition in their education efforts to the community, landlords, and Home Builders Association to create such housing
- Encouraging the Social Security Administration to streamline the disability process; help clients to apply as soon as they accept their disability; support Vocational Rehabilitation as they work with employers to hire employees that require more support; hold psychiatric hospitals and units more accountable for their discharge planning
- Asking for donations of tickets from museums, zoos, theaters, concert providers, and bus tickets from TARC.

12. *Number of Homeless Clients with Serious Mental Illness to be Served –* 55 homeless men with severe mental illness (SMI).

13. *Housing Services -* The Shelby Men's Center offers transitional living facilities with semi-private sleeping rooms as a base for the clients as they develop the independent living skills needed for self sufficiency. Housing resource development, an integral part of the client's

individual plan, is offered through the local CMHC and Shelby Men's Housing Counselor, who is an AmericaCorps member. Suitable permanent housing arrangements have been made in the past with Woodgreen Apartments (a VOA program); Wellspring, a non-profit owner and developer of permanent housing options for persons with severe mental illness; New Directions Housing Corporation (a local developer of low-income housing); Shelter Plus Care Section 8 rental certificates from the Jefferson County Community Development Department; the Housing Authority of Louisville; and the Housing Authority of Jefferson County.

14. *Special Needs of Clients with Co-occurring Serious Mental Illness and Substance Use Disorders* – Prior to entrance into the program, a qualified mental health professional will make an initial assessment that will include DSM-IV diagnostic criteria for chemical dependency and abuse. When the client arrives at the program, a Certified Alcohol and Drug Counselor will confirm any chemical diagnosis. Clients with a coexisting condition will be provided a full range of substance abuse treatment on the unit which will include: a) counseling by an experienced alcohol and drug counselor, b) basic alcohol and drug education, c) staff facilitated integration into AA and NA with attendance at a minimum of five meetings per week, d) a course in Recovery Dynamics, e) exposure to cognitive drug and drink refusal, and f) a viable aftercare plan will be developed by the client.
15. *Cultural Competence/Diversity* – Professional staff will be trained through the VOA Training Institute in issues related to multiculturalism. A graduate level practitioner trained in diversity issues will conduct special staff meetings on a periodic basis that address the issues of diversity. Consistent supervision by staff trained and qualified in diversity awareness will be a specific emphasis in the regular operation of the Shelby Men's Center. Issues of multiculturalism and diversity are addressed in the Program manual and the VOA Policy Manual that all employees are required to read. Diversity Training is provided to all new employees as a part of New Employee Orientation conducted by the Department of Health Services. Staff are culturally representative of the Louisville/Jefferson County population and the residents of the Shelby Men's Center, with 40% of the staff being female, 17% of Polynesian descent, and 50% of the staff being African American.
16. *Involvement of Consumers and Family Members* – An exit interview has been developed for clients leaving the Shelby Men's Center. In this manner, consumers are able to voice their concerns about services received. This information is used to improve programming and is part of the overall agency's QI program.

Families will be encouraged to fill out the same exit interview and results will be statistically analyzed. Family members will be encouraged to participate in the Concerned Family Sessions offered at the Center to enable family members to more realistically provide support to their family member.

Northern Kentucky Mental Health/Mental Retardation Board, Inc.

1. *Name and Type of Organization* -- Northern Kentucky MH/MR Regional Board. DBA NorthKey Community Care, a community mental health center.
2. *Service Area* --Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, and Pendleton)
3. *PATH Funding* -- \$85,000
4. *Flow of PATH Funds* – Funds are contracted directly to NorthKey from the state.
5. *Direct/Indirect Services* – NorthKey provides direct services through its Homeless Outreach Program.
6. *Non-PATH Funded Homeless Services* – Welcome House,Storehouse Ministries, Fairhaven Rescue Mission, Women’s Crisis Center, Parish Kitchen, Northern Kentucky Family Health Centers, and non-PATH funded services provided by NorthKey Community Care such as residential, therapeutic rehabilitation, and employment rehabilitation.
7. *Coordination of Services* – Outreach staff are located at the Scott Street office of NorthKey Community in Covington (Kenton County). Shelter staff refer homeless clients to the walk-in clinic and efforts are made to communicate regularly with the referral sources to help identify and engage homeless individuals with mental illness in treatment. PATH staff work closely with the shelters and the payee programs to provide as rapid a transition from homelessness to a safe living environment as possible, while working to meet the mental health care needs of our clients. Outside of these two counties, outpatient mental health services are provided to PATH-eligible clients utilizing non-PATH resources through the offices of the CMHC, located throughout the region. Inpatient care is provided by two local hospitals, St. Elizabeth and St. Luke. Area resources include:
 - (a) NorthKey Community Care operated residential programs of Greenup Haus, Transition Apartments, and Hermes Place. PATH clients are eligible for all programs. Prior to admission, the individual is assessed by a mental health professional and then screened in a multidisciplinary staffing process.
 - (b) Welcome House operates a temporary shelter for homeless women and children, including some with mental illness. Under a subcontract with the Regional Board, Welcome House provides supportive payee services to individuals with severe mental illness. PATH staff are in contact with staff of Welcome House often.
 - (c) Fairhaven Rescue Mission provides temporary shelter for homeless men for a maximum of several days. PATH staff plan to visit the shelter more often when a full time case manager is hired.
 - (d) Parish Kitchen provides one meal/day to homeless individuals. PATH staff visit the Kitchen periodically and refer clients there.
 - (e) Women’s Crisis Center operates a shelter for abused women and children under a subcontract with the Center. A NorthKey psychologist has recently been offering some

consultation and education for staff on a monthly basis that potentially will increase referrals into the homeless program.

- (f) Pike Street Clinic provides basic medical care free of charge.
- (g) St. Vincent de Paul has recently started operating a Pharmacy Program to help those who cannot afford medications.
- (h) Droegge House has a working agreement with Welcome House to facilitate a swift admission into their program when alcohol detoxification is a service needed by the homeless client. PATH staff are able to work in coordination with both agencies to get these needed services for clients.
- (i) In addition, NorthKey PATH staff utilize vocational services such as NorthKey's Employment Rehabilitation Program and the Kentucky Bureau of Rehabilitation Services.

8. *Services to be Provided with PATH Funds –*

- Outreach
- Screening and Diagnostic Assessment
- Habilitation and Rehabilitation
- Community Mental Health
- Alcohol or Drug Treatment
- Staff Training
- Case Management
- Supportive and Supervisory Services in Residential Settings
- Referrals for Primary Health, Job Training, Education Services and Relevant Housing Services

9. *Housing Services Provided Through PATH Funding –* Housing services provided include:

- Planning of housing
- Technical assistance in applying for housing assistance
- Security deposits
- Minor renovations, expansion, and repair of housing

10. *Current and Anticipated Gaps in Needed Services --*

- (a) Lack of a crisis intervention facility in the region.
- (b) Shortage of emergency housing for men for more than a few days.
- (c) Shortage of community-based medical care for the indigent.
- (d) Shortage of safe, affordable housing stock.
- (e) Shortage of mental health care (both public and private) in the community (all disciplines).
- (f) Opposition of the business community and city government to development of additional services for the homeless population.

11. *Strategies to Overcome Gaps --*

- (a) The Governor's proposed budget for the next two years earmarks funding to develop more crisis stabilization services or units across the state. NorthKey has been encouraged to submit a proposal for adult services or a unit for adults.
- (b) Several years ago, NorthKey Community Care opened its first emergency shelter facility six apartments) in Erlanger. Three years ago, we opened three additional apartments in Covington, and one year ago opened more. The Housing Developer continues to pursue grants to allow utilization of private housing stock.
- (c) It was hoped that the Life Learning Center (the central location for an array of services for the homeless) planned for Covington would alleviate the shortage of community based medical care. This project has been fully funded, land donated, and architectural drawings completed. Unfortunately, the City of Covington refused to issue a building permit and so far has blocked this project from proceeding.
- (d) The NorthKey Community Care Housing Developer has worked with the Housing and Homeless Coalition to develop a number of additional housing units, several of which have been earmarked for NorthKey Community Care clients. We have received preliminary approval for a HUD Supportive Housing program for the City of Covington. This would allow permanent rental assistance for homeless and disabled families.
- (e) There continues to be a severe shortage of psychiatric providers, both private and public, in the area. NorthKey Community Care has been intensively recruiting.
- (f) NorthKey administration is actively working with other area social service agencies to counteract the city's efforts.

12. *Number of Homeless Clients with Serious Mental Illness to be Served* -- NorthKey will serve in its' Homeless Outreach Program 100 individuals.

13. *Housing Services* – NorthKey provides an array of housing opportunities including:

- (a) The Center's Housing Developer administers a HOME funded transitional rental assistance program.
- (b) The Center's Housing Developer administers the PLANKS grant which provides rental subsidies for limited periods of time.
- (c) The Center continued to operate Greenup Haus, Hermes Place, and Transition Apartment residential facilities.
- (d) The Center's Housing Developer will continue to work with the Housing and homeless Coalition to develop additional housing resources.
- (e) The Housing Developer will continue to pursue grants and other funding sources.

14. *Special Needs of Clients with Co-occurring Serious Mental Illness and Substance Use Disorders* -- Needs of clients who have a severe mental illness and a coexisting substance abuse disorder are met in a number of ways:

- (a) PATH staff regularly refer individuals with substance abuse disorders to groups that specifically serve the chemically dependent such as Alcoholics Anonymous and Narcotics Anonymous.
- (b) The detoxification and residential treatment facilities operated by Transitions, Inc., a

Board subcontractor, are available to PATH clients with severe mental illnesses and substance abuse disorders.

- (c) The Family Alcohol and Drug Treatment Program of NorthKey Community Care, housed in the same building as the PATH program, provides substance abuse treatment services for the chemically dependent and their family members.
- (d) The Center's residential programs, particularly Greenup Haus, are geared to meet the needs of this population.
- (e) The Center has embarked on a new program, Intensive Home-Based Services, which provides support systems similar to those in its Greenup Haus residential program to clients in scattered site housing to enhance community tenure. This includes monitoring for substance abuse.
- (f) The Center's Therapeutic Rehabilitation and Consumer Social Recreation programs provide a safe, drug-free environment in which time is structured in positive, healthy manners.

15. *Cultural Competence/Diversity* – Currently all four PATH staff are Caucasian; one is a native of Portugal. The Caucasian population is the dominant population in the region (98% in Covington, higher in other areas). The largest minority racial group is African-American; the largest minority cultural group is Appalachian (by far the largest minority group in the region). Homeless Outreach staff have received training in dealing with both populations. The Center as a whole has a multi-racial, multi-ethnic staff. All staff receive training around cultural and ethnic issues on an annual basis.

16. *Involvement of Consumers and Family Members* – Consumers participate in development of agency services through a variety of means including:

- Planning: As a routine part of the initial assessment process, family issues are looked at and the consumer is specifically asked about his or her interest and desire for family involvement in the treatment process. The Center has a Consumer Advisory Group that is convened bimonthly to offer input and suggestions. This group includes consumers from NorthKey Community Care programs and from the Recovery Network, a consumer-operated organization.
- Implementation: The consumer and clinician formulate the individual's treatment plan together, and changes are made only after discussion between the consumer and the therapist. Consumers (and family members, if appropriate) are advised of their rights and responsibilities at the time of the first visit, and of the Center's grievance process.
- Evaluation: Consumer satisfaction is surveyed every three months, and consumers have an opportunity at this time to express opinions or request to consult with a member of management. In addition, PATH consumers are surveyed annually about PATH-specific aspects of services.

Welcome House (subcontractor of Northern Kentucky Mental Health/Mental Retardation Board, Inc.)

1. *Name and Type of Organization* – Welcome House of Northern Kentucky, Inc., a private non-profit agency
2. *Service Area* - Primarily Kenton, Campbell, and Boone, but also Carroll, Gallatin, Owen and Pendleton Counties
3. *PATH Funding*-- \$15,000
4. *Flow of PATH Funds* – PATH funds are contracted from the state to NorthKey Community Care, a regional mental health authority, then subcontracted to Welcome House.
5. *Direct/Indirect Service* – Welcome House uses all of its PATH funds to provide direct services.
6. *Non-PATH Funded Homeless Services* - The Northern Kentucky region provides a number of services not supported by PATH funds. Clinical services which work with and/or target PATH-eligible persons include:
 - (a) St. Elizabeth Hospital and St. Luke Hospital, Service-Emergency Room and in-patient health and mental health treatment.
 - (b) Eastern State Hospital, Service-Long term inpatient mental health treatment.

Other supportive services which work with and/or target PATH-eligible persons include:

- (1) Welcome House Emergency Shelter, Service-Emergency Shelter for homeless women and children including case management and support program components.
- (2) Mental Health Association Programs, Service-Just Friends, friendship support group, peer mentoring.
- (3) The Northern Kentucky Alliance for the Mentally Ill, Service-family support.
- (4) Northern Kentucky Family Health Center/Pike Street Clinic provides a walk-in nursing clinic to assist homeless persons in accessing primary health care.
- (5) The Parish Kitchen, Service-offers a free noontime meal.
- (6) Welcome House, Brighton Center, Covington Community Center, Northern Kentucky Community Center, provides emergency assistance (food, commodities, non-food items, medical assistance, emergency financial assistance, advocacy and referral services).
- (7) Fairhaven Rescue Mission, Service-Emergency Shelter for homeless men (limited service).
- (8) Vocational Rehabilitation
- (9) BAWAC – Shelter Workshop/Supported Transitional Employment
- (10) Cabinet for Health Services – Food Stamps, Qualified Medical Benefits
- (11) Social Security Administration – SSI/SSDI Benefits/Application, etc.

- (12) Housing: Covington and Newport Public Housing Authority; Kenton, Campbell and Boone County Section 8; Wilson Enterprise; Cambridge Square and Carriage House; St. Aloysius; LaSalette Gardens.

Additionally, Welcome House's Payee Program is supported by funding received from the Health Foundation of Greater Cincinnati, United Way, Community Mental Health Services Block Grant funds, Kentucky Department for Mental Health and Mental Retardation Services, state funds, private and church donations.

7. *Coordination of Services* – The Welcome House Protective Payee Program assists clients with mental illness who are homeless to obtain and maintain permanent housing and live independently in the community. The program provides financial case management throughout the client's life to help prevent the reoccurrence of homelessness. Most clients remain in the protective payee program until their death. PATH funds are utilized to assist persons with mental illness who are homeless or have been homeless within the past year. Welcome House then seeks other funding sources to continue program services for clients attempting to maintain housing stability with the assistance of case management/payeeship services.
8. *Services to be provided with PATH Funds* -
 - Case management (including representative payeeship)
 - Outreach
9. *Housing Services provided through PATH Funding* – Housing services provided include:
 - Security deposits
10. *Current and Anticipated Gaps in Service* - Major gaps in services among local providers include:
 - (1) Lack of emergency shelter for men with mental illness
 - (2) Dual Diagnosis Services (Alcohol/Drug & Mental Illness)
 - (3) Employment opportunities
 - (4) Continuum of housing options: group homes, low-income, subsidized housing
 - (5) Lack of evening and weekend social activities.
11. *Strategies to Overcome Gaps* - Community strategies for overcoming these gaps include the proposed development of a “one-stop” day shelter which would provide showers, mail boxes, day programs, drop-in work opportunities, etc. for our homeless population, many of whom have a mental illness. This project, as well as efforts to develop more housing opportunities, was partially funded in 1998 through a HUD Supportive Housing Program (SHP) grant, with Transitions, Inc. as the lead agency. These funds will be utilized to build/renovate 10 units of housing and a facility for the beginning of a day shelter. Construction has been delayed by opposition from the City of Covington. A location has been established for the facility and there is hope that the facility will be approved in the

spring of 2002. Very basic funding is allotted for outreach with limited staffing. Additional SHP grant funds were secured in 1999 that provide for additional case management, psychiatric services, chemical dependency treatment, support for job/employment training and outreach.

A Payee Peer Support Program is being developed with funding from the Health Foundation of Greater Cincinnati to address the need of clients for greater educational, emotional, social and spiritual support. Two support groups geared toward educational and social needs will be developed by a Peer Support Specialist. The goal of this project is to develop greater leadership and independence among our clients so that greater quality of life and less dependence on Welcome House is achieved. As a result caseloads for case managers may be lightened and additional clients should be accommodated.

12. *Number of Homeless Clients with Serious Mental Illness to be Served* – Welcome House intends to serve 25 persons with serious mental illness who are currently homeless or have a history of cyclical homelessness with PATH funds.

13. *Housing Services* - Through case management services and housing resource services, efforts are made to coordinate/procure and maintain suitable housing for clients in the Protective Payee Program. The Welcome House program has agreements with the local HUD and Section 8 departments to assist clients in completing the application for housing.

Welcome House staff work hard with every client in an attempt to obtain subsidized housing for them. Relationships have been established with Section 8 of Kenton, Boone, and Campbell counties; the Housing Authority of Covington and the Newport Housing Authority; Section 8 site-housing projects in all three counties; and with many private landlords. Local landlords often call us when they have an opening to see if we have a client needing housing. Landlords like to work with Welcome House, because they know that we receive the clients' checks each month and, therefore, rent will be paid as long as the client lives there.

14. *Special Needs of Clients with Co-occurring Serious Mental Illness and Substance Use Disorders* – Approximately one half of persons served in the payee program are diagnosed with co-occurring substance abuse. Protective Payee Program clients suffering from co-occurring SMI and substance abuse will be offered services provided by the mental health and substance abuse programs of the Northern Kentucky CMHC. In addition, their needs may be met by Welcome House Supplemental Supportive Assistance and/or Social Security application and/or appeal services.

15. *Cultural Competence/Diversity* – By following the Welcome House policy listed below, the caseworkers are sensitive to age, gender and racial/ethnic issues and differences among clients.

Welcome House non-discrimination policy: “Welcome House will not discriminate on the basis of race, age, sex, religion, ancestry, veteran status, sexual orientation, mental or physical handicap, or developmental disability “.

Welcome House has a number of opportunities for ongoing training and education. Orientation and training sessions are provided quarterly for staff, board members, and volunteers.

As an agency, Welcome House continually faces different needs for staff education and training as social, economic, legal, political, and cultural changes occur. Most recently all staff received training in collaboration both within and outside of the agency. There also have been a number of special training sessions for case managers in the recent quarter.

The Payee staff of Welcome House has a broad and diverse range of experience and education. The all female staff range in age from 21 to 56 years old. Their educational experience is quite varied: the coordinator has her Masters in Social Work, one case manager has a bachelor's degree in Psychology, and the other two case managers have their high school diplomas. The staff's diversity in the areas of age, education, and life experience allows them to address issues of diversity in the clients they serve.

16. *Involvement of Consumers and Family Members* – Payee Program clients have many opportunities to give input about our services. Staff members meet weekly with most Payee clients, provide them with a monthly financial report, conduct group activities bi-weekly, take clients on an annual vacation trip and hold weekly men's and women's group meetings. Whenever interacting with clients as described above, staff members listen to their needs, wants and suggestions. All social activities are suggested or requested by clients. Each client's monthly budget is developed based on his or her individual needs.

For many clients, there is no family involvement either because they have no family, the whereabouts of their family is unknown, or the family members avoid any involvement. When family members are available, Payee staff encourage their involvement and input as long as the client is receptive and there is no breach of the client's confidentiality.

Bluegrass Regional Mental Health/Mental Retardation Board, Inc. and its subcontractor, the HOPE Center

1. *Name and Type of Organization* -- Bluegrass Regional MH/MR Board, a community mental health center, and its subcontractor the HOPE Center Inc., a private non-profit agency
2. *Service Area* – Lexington and Fayette County
3. *PATH Funding* -- \$110,000
4. *Flow of PATH funds* – PATH funds are contracted from the state to Bluegrass Regional MH/MR Board, a portion of which is sub-contracted to the Hope Center.
5. *Direct/Indirect Services* – Both the Bluegrass Board and the Hope Center, its subcontractor, provide direct services on-site at the Hope Center. Some staff are employed by the Board; others by the Hope Center.
6. *Non-PATH Funded Homeless Services* – The Bluegrass Regional MH/MR Board provides other non-PATH funded mental health services. Other services which work with and/or target PATH-eligible persons include:
 - (1) Canaan House, Inc. (efficiency apartments).
 - (2) Saddlebrook Apartments (a supervised apartment program)
 - (3) St. James Place (a 99-bed SRO facility)
 - (4) Salvation Army
 - (5) Lexington-Fayette County Health Department
 - (6) Chrysalis House, a comprehensive substance abuse treatment program
7. *Coordination of Services* – Clients involved in the PATH program will also have access to these other providers (listed above). Staff will make clients aware of these options and provide referrals and linkages as indicated. Case managers and the psychiatric nurse provided by the CMHC will continue to be based at the HOPE Center, thereby interacting regularly with the individuals in need of additional resources. These resources may include community, social, medical, and vocational services. The HOPE Center is involved in other inter-agency groups such as Lexcare, the Housing Commission, and Social Ministries. Most recently a Homeless Coalition has begun organizing in the Lexington area. The director of Community Support Program (CSP) at the CMHC is participating in this coalition and in the Provider's Cabinet, a monthly meeting of many social service providers in the area. The CSP director also supervises the three CMHC staff at the HOPE Center and attends some of the weekly mental health treatment team meetings. The CSP director also serves on the Hope Center Board in a consultant position, alongside representatives of other programs related to the population served at the HOPE Center.

8. *Services to be Provided with PATH Funds –*
 - Outreach
 - Screening and Diagnostic Assessment
 - Community Mental Health
 - Staff Training
 - Case Management
 - Rehabilitation
 - Supportive and Supervisory Services in Residential Settings
9. *Housing Services Provided through PATH Funding –* No housing services, as described in the PATH statute, are provided with PATH funding.
10. *Current and Anticipated Gaps in Services –* Outreach services have improved greatly due to the efforts of staff and the use of the “HOPE-Mobile” which allows for extensive outreach in the community, connecting with individuals not receiving services at the HOPE Center. St. Joseph Hospital is involved in this successful project too.

HOPE offers transitional housing and is developing an off-site program to be located near HOPE Center for recovering individuals as an incentive and reward for continued sobriety and growth in their own personal recovery. This incentive program, based on progress, is on a very limited basis, but will soon be expanded and be available to PATH clients as well.

There continues to be an increased need for services for individuals with a primary substance abuse diagnosis who also have less severe mental illness. The HOPE Center does offer its Dual Diagnosis service as a part of the recovery program process, but the demand is greater than one facility can possibly meet. Payee services are still very limited and the demand for this service greatly exceeds the supply of payees.

11. *Strategies to Overcome Gaps –* The HOPE Center has its new housing unit up and running for those men in advanced stages of recovery including PATH clients. This will provide a stronger continuum of service for this population. The CMHC has developed a payee service to further meet the demand for payeeship directed towards all adults with mental illness, whether homeless or not. Dually diagnosed persons may be able to utilize the Schwartz Center, a program of the CMHC which may provide residential treatment for such persons. The HOPE Center has developed the Regain Program for the dually diagnosed.
12. *Number of Homeless Clients with Serious Mental Illness to be Served –* The program expects to serve 125 persons with serious mental illness.

13. *Housing Services* - Through the provision of case management services and the accompanying housing support services, efforts will be made to coordinate/procure suitable housing for clients participating in this program. Case managers and housing support staff have established working relationships with local apartment managers and other housing programs including a 99-bed SRO (St. James Place), and the eight unit Canaan House. We have continued to increase the number of Shelter-plus-Care Section 8 vouchers through the Bluegrass Board, a process that is carefully monitored.
14. *Special Needs of Clients with Co-occurring Serious Mental Illness and Substance Use Disorders* – The HOPE Center offers regular Dual Diagnosis groups, provides 12 Step meetings, screenings, referrals to Dual Diagnosis groups at the CMHC day programs, and referrals to CMHC’s drug and alcohol outpatient program when indicated. HOPE has also increased the number of staff responsibilities to include assistance to the dually diagnosed clientele. As mentioned previously, additional inpatient treatment may become available at the CMHC’s residential substance abuse program.
15. *Cultural Competence/Diversity* – The Bluegrass MH/MR Board and the HOPE Center staff have opportunities for sensitivity training workshops at many conferences and through regular Board training events. The Board has mandatory diversity training for all its staff. The HOPE Center continues to provide a specialist in Hispanic culture who manages services for Hispanic consumers. In addition, supervision of program staff addresses these issues at various levels.
16. *Involvement of Consumers and Family Members* – Consumers are involved in group content and structure at HOPE, having input into decision-making for their own treatment groups. They also have the opportunities to attend consumer conferences held in the area and often do participate in same. Of course, they are always involved in their treatment planning with the clinicians and with the case managers.

Families are encouraged when available to become involved in treatment and programming at the HOPE Center and at the CMHC. The CMHC is very involved with the local NAMI chapter (NAMI-Lexington). The CSP director attends regular meetings with representatives of this group, its members speak with staff, and information is shared about services, needs and other matters of concern at the CMHC and at the HOPE Center.